TOBACCO TAX FUNDS REPORT

(FY2007 Appropriation Bill - Public Act 330 of 2006)

April 1, 2007

Section 213: The state departments, agencies, and commissions receiving tobacco tax funds from part 1 shall report by April 1, 2007, to the senate and house of representatives appropriations committees, the senate and house fiscal agencies, and the state budget director on the following: (a) Detailed spending plan by appropriation line item including description of programs. (b) Description of allocations or bid processes including need or demand indicators used to determine allocations. (c) Eligibility criteria for program participation and maximum benefit levels where applicable. (d) Outcome measures to be used to evaluate programs. (e) Any other information considered necessary by the house of representatives or senate appropriations committees or the state budget director.



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MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

HEALTHY MICHIGAN FUND PROJECT REPORT



For The Period October 1, 2005 to September 30, 2006

Healthy Michigan Funds are used to support behavioral and public health activities at the community level. Activities and accomplishments are evidence of positive steps being taken to reduce preventable death and disability in Michigan residents. These local activities have a direct impact on many of the 25 Michigan Critical Health Indicators.

This portion of the Healthy Michigan Fund Report presents highlights of FY 2006 accomplishments for all the Healthy Michigan Fund projects, their indicators of success, along with future goals for FY 2007.

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Appropriations # - 11384 Alzheimer's Information Network

FY 06 Funds Appropriated \$290,000

FY 07 Funds Appropriated \$290,000

| Alzheimer's Information Network Services,* FY2006 | | | | |
|---|-----------|----------------|--|--|
| | Number | Persons Served | | |
| | Completed | | | |
| Consumer | | | | |
| Help line calls | 7,372 | 92% | | |
| Presentations | 1,296 | 19,374** | | |
| Support Group | | | | |
| meetings | 1,937 | 18,003** | | |
| Newsletters | 154,421 | 154,421 | | |
| Professional | | | | |
| Presentations | 133 | 3,299 | | |
| Newsletters | 24,501 | 24,501 | | |

Source: Alzheimer's Information Network Report.

CMS OSCAR Form 672:F78, F108-F114, American Health Care Assn.-Health Services Research & Evaluation Project Name: Alzheimer's Information Network

Target Population: 240,000 persons in Michigan with dementia, and 240,000 family care partners, primary care physicians, direct care workers, and other health professionals.

Project Description: An estimated 240,000 residents have dementia due to Alzheimer's disease and related disorders. Preventable complications of dementia and excess disability lead to increased cost of care and increased demand for long-term care. Alzheimer's disease is the third most expensive disease in the country after heart disease and cancer. The Dementia Programs support the Michigan Dementia Coalition, which brings the expertise and resources of multiple agencies to bear on priority cost – reduction strategies. Through the Michigan Dementia Coalition, Michigan has a network of primary care physicians who serve as leaders in disseminating dementia best-care practices in the medical community. The Dementia Program also funds a network of community dementia agencies (Alzheimer, Huntington's and Parkinson's) to provide information, education and support to caregivers. Statewide toll-free help lines, support groups, and education programs are critical services for families overwhelmed by the demands of caregiving for persons with dementia.

Project Accomplishments for FY 2006:

- Caregivers and others made 9,600 calls to dementia help lines for information and assistance, with 92% of callers finding the information helpful.
- 1,526 families or individuals participated in Care Consultation services.
- 19,180 family caregivers and professionals participated in dementia educational presentations, programs and workshops.
- Support group meetings provided information, education, and support to more than 1,250 meeting participants.
- The Michigan Primary Care Dementia Network with 73 participants developed and piloted dementia care quality indicators.
- There were 133 dementia educational presentations, programs, or workshops for professionals, with 3,300 individuals participating.

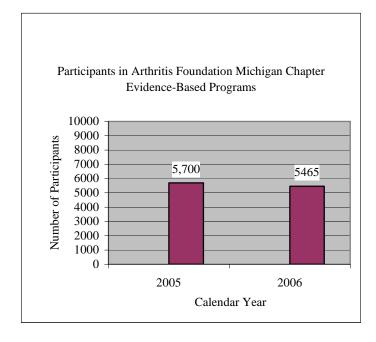
- 80% of help line callers who receive a referral will report that the information was helpful.
- 80% of family caregiver participants in dementia education will increase their ability to be an effective caregiver.
- 80% of support group participants will increase their ability to help the person with memory loss.
- 75% of families or individuals who participate in Care Consultation will complete some or all of the steps discussed in care planning.

^{*}Network agencies funded by this Project receive funding from various sources along with HM Funds that contribute to these accomplishments.

^{**}Participants are counted more than once if they participated in more than one presentation or participated in multiple support group meetings.

Appropriations # - 11380 Arthritis

FY 07 Funds Appropriated \$50,000



Note: Healthy Michigan Funds are being used in 2007 to support and expand these evidence-based programs: Arthritis Foundation Aquatic, Exercise and Self-Help Programs.

Source: Arthritis Foundation of Michigan Chapter

Project Name: Arthritis

Target Population: Adults with Arthritis in underserved program areas of the state.

Project Description: through funding to the Arthritis Foundation Michigan Chapter (AFMC), the projects are designed to expand the reach of evidence-based programs to populations of people with arthritis. Emphasis is placed on building new partnerships with agencies that have the infrastructure and resources to help the AFMC accomplish its goals and sustain programs.

Project Goals for FY 2007:

- Working with the Michigan Office for Services to the Aging (MI-OSA), partner with at least three area agencies on aging to develop infrastructure for evidence-based programs.
- Expand programming of Arthritis Foundation Exercise Programs to reach 150 participants compared to FY 06.
- Expand programming of Arthritis Foundation Self-Help Course to reach an additional 60 people with arthritis compared with FY 06.
- Host two Arthritis Foundation Exercise Program leader training workshops training at least 15 leaders in key target areas
- Develop new partnerships in at least one of the following sectors: public health departments, MSUE, aging services network, hospital systems or health insurers

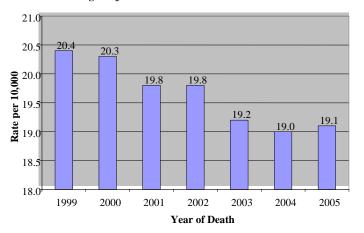
Arthritis Foundation reports and REACH documents will be utilized to monitor the outcomes of both projects.

Appropriations # - 11352 Cancer Prevention and Control

FY 06 Funds Appropriated \$2,571,200

FY 07 Funds Appropriated \$ 2,586,900

Age-Adjusted Death Rates Due to Invasive Cancer



Source: DVRHS, MDCH.

Project Name: Cancer Prevention and Control

Target Population: Adult residents of Michigan

Project Description: To reduce cancer mortality and morbidity in Michigan residents. Three programs receive federal grant funds plus state Healthy Michigan funds to accomplish this goal: 1) Michigan's Breast and Cervical Cancer Control Program (BCCCP) provides access to breast and cervical cancer screening and follow-up services. If diagnosed with breast or cervical cancer though the BCCCP, women then qualify for treatment through Medicaid. 2) The WISEWOMAN (WW) Program provides healthy lifestyle interventions to reduce risk of cardiovascular disease and cancer for women enrolled in BCCCP. 3) Michigan's Comprehensive Cancer Control Program is coordinated by MDCH and implemented by the Michigan Cancer Consortium (MCC), a statewide network of 90 public and private organizations, committed to reducing mortality from cancers with the greatest cost and disease burdens for MI citizens.

Project Accomplishments for FY 2006:

- BCCCP's assigned caseload was surpassed with 22,312 women age 40 to 64 receiving services; nearly 11,000 women ages 40 to 49 received screening mammograms funded by HMF.
- 3,664 BCCCP-enrolled women received WW Program healthy lifestyle interventions.
- Women enrolled in BCCCP receive high quality screening/diagnostic services as ensured by MPRO's CQI monitoring. BCCCP exceeded national standards for promptness in obtaining diagnostic services for women with abnormal screening exams and timeliness of starting cancer treatment.
- Three communities with higher than average colorectal cancer mortality rates built capacity, implemented outreach strategies and provided colorectal cancer early detection programs in FY06 for uninsured men and women, ages 50 to 64.
- The Primary Care Consortium was formed, to engage key leaders in the implementation of the Primary Care Initiative's strategic plan to resolve system barriers that impede clinicians from routinely providing evidence-based prevention and chronic disease care to Michigan stakeholders.

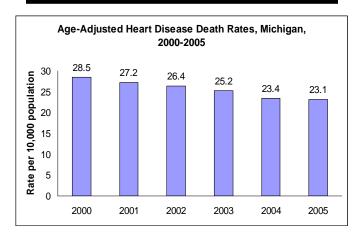
- Provide screening mammograms to 11,000 low-income women ages 40 to 49 enrolled in the BCCCP.
- Screen and provide healthy lifestyle interventions for up to 4000 low-income women through the WISEWOMAN Program to reduce risks associated with hypertension, smoking, and high cholesterol.
- Expand capacity and infrastructure to provide screening and diagnostic services to uninsured MI men & women ages 50 to 64, and through the pilot Colorectal Cancer Early Detection Program.
- Increase the number of men and women screened for colorectal cancer by 50% from last year.
- Continue to leverage partners and resources to implement Primary Care Initiative's Strategic Plan to resolve system barriers and facilitate statewide primary care practice transformation.

^{*}Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

Appropriations # - 11380 Chronic Disease Prevention

FY 06 Funds Appropriated \$1,698,200

FY 07Funds Appropriated \$1.698,200



Source: DVRHS, MDCH.

Project Name: Cardiovascular Health

Target Population: Michigan citizens with a special emphasis on high-risk populations

Project Description: To improve management of risk factors related to heart disease/stroke, decreasing morbidity, premature mortality and healthcare costs. Funds are distributed through a competitive process.

Project Accomplishments for FY 2006:

- MI Stroke Initiative: An ongoing quality improvement program to improve response time and treatment for stroke, implemented in 13 hospitals statewide showed significant improvement in performance measures, resulting in 2,300 lives saved.
- <u>MI Hypertension Control Project</u>: Implemented new national guidelines to improve treatment and to educate, screen, and refer 4,500 people for follow-up.
- <u>Childhood Obesity Prevention Project</u>: Grants and technical assistance provided to schools to conduct an assessment process and implement changes to improve healthy eating and increase physical activity, impacting over 30,000 students. Partnered with MI Quality Improvement Consortium and Blue Cross/Blue Shield to develop guidelines for prevention and treatment.
- <u>Healthy Communities Initiative</u>: Grants and technical assistance provided to 38 communities to implement changes to support healthy eating and increased physical activity. Affecting change for over one million residents including over 200,000 Medicaid recipients.
- <u>Faith-Based Initiative</u>: Worked with 100 faith-based and community venues to educate 25,000 African Americans on preventing and managing cardiovascular emergencies.

- Fund eight additional hospitals to continue quality improvement programs affecting 6,100 stroke and heart patients.
- Continue to partner with health care organizations and providers in compliance with clinical guidelines in prevention and management impacting 10,000 patients including childhood obesity.
- Collaborations with American Heart Association, churches, and community organizations to improve awareness of risk factors will reach two million people including urban markets with high populations of African Americans.
- Provide grants and tools to 38 communities focusing on physical activity and healthy eating to one million residents and 200,000 Medicaid recipients.
- Improve healthy eating and physical activity levels of children (grades K-12) in 200 Michigan schools reaching 300,000 students and their families.
- Collaborate with the National Governor's Association and state level partners to provide grants and technical assistance to 25 businesses within disadvantaged Michigan cities to create healthy work environments and health behaviors of employees.

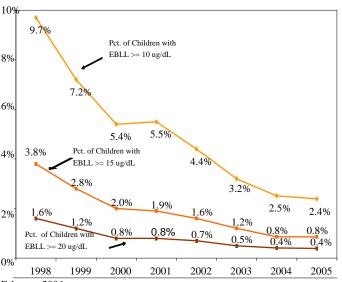
^{*}Rate age-adjusted to 2000 US population standard using ICD-10 codes as of

Appropriations # - 14254 Childhood Lead Programs

FY 06 Funds Appropriated \$1,000,000

FY 07 Funds Appropriated \$1,000,000

Elevated Blood Lead Levels (EBLL) in Michigan Children under Age Six, 1998 - 2005



February 2006

Source: MDCH Childhood Lead Poisoning Prevention Program statewide database

Project Name: Childhood Lead Poisoning Prevention

Target Population: Children below age 6 enrolled in Medicaid and/or at high risk and housing built before 1950 with potential lead hazards.

Project Description: Funds will be used for Coalition-building and coalition support; Case management of children and blood levels of >20 ug/dL; Lead Control & Prevention Commission; Ombudsman to assist with low-cost loans; Abatement; Public awareness; Development of a housing registry.

Project Accomplishments for FY 2006:

- Establishment of new coalitions in target communities.
- Testing percentages continue to increase in Medicaid and high risk populations.
- Testing in WIC is occurring in nearly all of the health departments in response to PA 286 of 2006.
- Approximately 40 homes were abated of all lead hazards.
- The ombudsman has generated low interest loans of over \$250,000 for families requesting assistance.
- The Lead Safe Housing Registry development continues per PA 433 of 2004.
- Grant writing technical assistance was provided to local communities to assist in securing \$3,000,000 HUD grant funds.

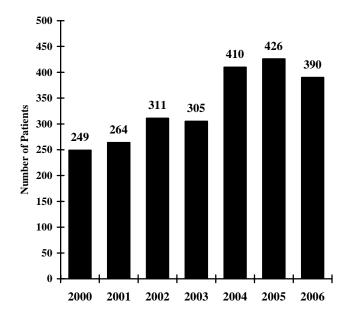
- Training for local health department and prosecutors re: liability of rental property owners will be completed.
- All children in WIC will be tested at appropriate intervals.
- Coalitions will be established in all 13-target communities.
- Funding for Public Health Trust will be sought from a variety of sources.
- Commission will complete long-range plan for elimination of childhood lead poisoning.
- Medicaid Health Plans will reach 80% testing rates.
- Lead Safe Housing Registry per PA 433 of 2004 will be completed.
- Approximately 30 homes will be abated of all lead hazards.
- Muskegon County will receive grant writing technical assistance to help secure a HUD grant.
- The Lead Ombudsman will continue to assist families in need and bring in additional match funds for lead abatement.

Appropriations # - 14274 Dental Programs

FY 06 Funds Appropriated \$150,000

FY 07 Funds Appropriated \$150,000

Number of Patients Receiving Comprehensive Dental Care, 2000 - 2006



Source: Oral Health Program, MDCH.

Project Name: Dental Health

Target Population:

- 1) Donated Dental Services: Persons who are mentally or physically handicapped, who are medically compromised or elderly.
- 2) Wayne County Dept. of Health: Pediatric clients of the Wayne County Oral Health Services

Project Description:

- 1) Donated Dental Services: Through a network of volunteer dentists, eligible patients are referred for comprehensive dental care. Two referral coordinators staff the toll-free phone lines, process applications and match patients with volunteer dentists. The legislation appropriates the Healthy Michigan Fund allocation to the Donated Dental Service Program administered through the Michigan Dental Association. Part of the legislative appropriations supported the Wayne County Department of Public Health.
- 2) Wayne County Dept. of Health: Provide dental care under Primary Care Dental Special Project.

Project Accomplishments for FY 2006:

- 1) Donated Dental Services:
 - 390 patients received comprehensive dental care, a 1% decrease from FY 05.
 - 5,146 dental procedures were provided, a 1% decrease from FY 05.
 - 806 dentists volunteered; a 1% decrease from FY 05.
 - 190 dental laboratories donated \$89,087 in laboratory services, 1% less than FY 05.
 - Michigan dentists and dental laboratories for dental treatment donated a total of \$898,055, a 1 % decrease from FY 05.
 - Return on Investment: Every \$1 spent = \$7.03 worth of services received.
- 2) Wayne County Department of Health:
 - Avg. 88 clients seen monthly; treatment focused on preventive dental services to children.

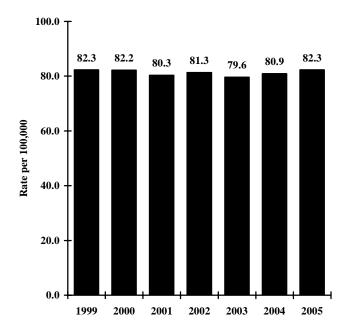
- Recruit dentists to participate; thus, reducing two-year waiting list to apply for services and the 1-3 year waiting list to get services.
- Provide \$1,120,000 worth of donated dental treatment.
- Increase number of individuals served to 435.
- Provide \$98,000 worth of donated laboratory fabrications.
- Increase distribution of volunteer dentists to have 75% of the counties in Michigan participate in the Donated Dental Service Program.

Appropriations # - 11363 Diabetes and Kidney Program

FY 06 Funds Appropriated \$2,315,200

FY 07 Funds Appropriated \$2.315,200

Michigan's Age-Adjusted Diabetes-Related Mortality
Rate
1999 - 2005



Source: Vital Records & Health Data Development Section, MDCH.
*Rate age-adjusted to 2000 US population standard using ICD-10 codes as of 1999.

Project Name: Diabetes - Local Agreements

Target Population: Persons at-risk for or with pre-diabetes, diabetes and/or kidney disease

Project Description: Funds are distributed to agencies providing educational, consultation, consumer-based and other services intended to prevent onset of diabetes, reduce mortality/morbidity from diabetes & kidney disease and improve quality of life for persons w/ diabetes and/or kidney disease. Primary recipients of funds are Diabetes Outreach Networks (DONs) & National Kidney Foundation of MI (NKFM).

Project Accomplishments for FY 2006:

- A new surveillance tool was successfully implemented that will allow tracking program's impact on diabetes-related health & clinical behaviors (The Diabetes, Osteoporosis & Arthritis Survey); the MI Diabetes Prevention & Control Program (MDPCP) hired Diabetes Epidemiologist to lead program and Diabetes Partner in Action Coalition; Diabetes Optional Module included in 2006 BRFSS survey.
- In 2006, about 2,100 health care professionals received in-service trainings, attended conferences or took the self-study modules offered on the internet. The MDON informational website had an average of 2,500 hits per month.
- An NKFM beauty salon initiative, Healthy Hair Starts w/ a Healthy Body, trained more than 700 hair stylists and reached 14,500 African American and Hispanic clients in many of MI's urban centers. Nearly 59% of clients took a positive health behavior step (i.e., eating more nutritiously, increasing physical activity, or stopping smoking), and/or sought physician assistance about their health risks after talking with their stylists. A similar barbershop initiative demonstrated that nearly 69% of participants reported they are trying to take preventative steps. The African American Initiative for Male Health Improvement (AIMHI) screened and monitored 239 participants for chronic disease.
- NKFM implemented an educational program to 101,500 MI students, and certified diabetes self-management education programs increased to 91, with a total of 26,000 persons educated in 2006.

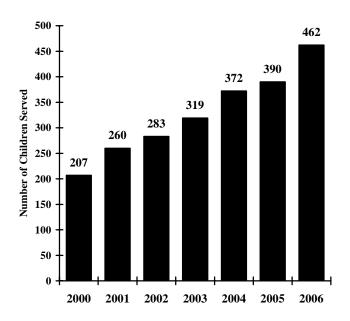
- Improve quality of diabetes care/management by at least 5% for key diabetes clinical indicators.
- At least 50% of NKFM Healthy Hair/Healthy Body program clients take positive health steps.
- At least 50% of all professionals completing a DON-sponsored professional education program will make a positive practice change.
- The Diabetes Prevention Pilot will screen over 200 low-income women and provide lifestyle interventions.

Appropriations # - 11393 Morris Hood Wayne State University Diabetes Program

FY 06 Funds Appropriated \$400,000

FY 07 Funds Appropriated \$400,000

Number of Children Served in Comprehensive Clinics, 2000-2006



Source: Diabetes Program reports, MDCH.

Project Name: Diabetes - Morris Hood WSU Diabetes Outreach

Target Population: Medically and economically underserved children, both those with diabetes and those at risk.

Project Description: The Outstate Research project provides team-based clinical and lifestyle guidance to medically and economically underserved children in clinics around the state. The Obese Minority Children at Risk program provides screening, follow-up and behavior change interventions to African American and Latino children in the Detroit area who are at high risk of developing diabetes.

Project Accomplishments for FY 2006:

- Outreach clinics were held in Marquette, Alpena, Jackson, Port Huron, Traverse City, and Jackson. A total of 462 children were seen with the team-based approach.
- Each child/family received an assessment of health status and compliance; problems are identified, diagnosed and treated by a comprehensive team of specialists (Pediatric Endocrinologist, MD, Certified Diabetes Educator, Registered Dietitian and Social Worker).
- 413 children with various Endocrine disorders were seen in Marquette.
- Children were screened for risk factors associated with the metabolic syndrome. 50% were either overweight or at risk of overweight. Of this group: 40% had elevated cholesterol level, 77% had no insurance, or were publicly insured, and 28% tested over the 95 percentile for BMI (obese).

- Outstate clinics will continue to see children in all the cities, with the exception of Eau Clair/Benton Harbor, holding 15 clinics.
- The team will continue to work with the children and their families, in clinic, and outside of clinic to improve compliance and health indicators.
- The Obese Minority project will screen over 800 students once during the year.

Appropriations # - 15173 Newborn Screening Follow-Up and Treatment Services

FY 06 Funds Appropriated \$250,000

FY 07 Funds Appropriated \$250,000

| EHDI Program Select Data Facts 2003-2005 | | | | |
|---|----------|----------|---------|--|
| | 2003 | 2004 | 2005 | |
| Number of | 131,381 | 129,387 | 127,518 | |
| Michigan Births | | | | |
| % Completed | 89% | 94% | 95% | |
| Hearing Screens | | | | |
| Reports | | | | |
| Referral rate | 2.9% | 3.5% | 3.6% | |
| from completed | | | | |
| screens | | | | |
| % Incomplete or | 11% | 5% | 3.0% | |
| missed hearing | | | | |
| screen reports | | | | |
| Average age | 122 days | 107 days | 75 days | |
| hearing loss | | | | |
| identification | | | | |

Source: MDCH, early Hearing Screening, Detection, and Intervention Program Data Facts Sheet NBS/EHDI Database

Project Name: Early Hearing Detection and Intervention (EHDI) Program

Target Population: All infants born in Michigan

Project Description: The project has three goals: 1) All infants will be screened for hearing loss before 1-month of age 2) All infants who do not pass the screening will have a diagnostic evaluation before 3-months of age and 3) All infants identified with a hearing loss receive appropriate early intervention services before 6-months of age. Timely early intervention can prevent many of the detrimental effects of hearing loss. Research demonstrates that intensive early intervention positively supports the language and cognitive development of young infants with disabilities. The EHDI program contributes directly to infants having language and communication experiences that support development. Grant funds have supported EHDI provider program training, literature development, database development, community development, follow-up activities and a family support system.

Project Accomplishments for FY 2006:

- The percentage of Michigan births that received newborn hearing screening increased from 94% in 2004 to 95% in 2005 and to 96% in 2006.
- The percentage of babies who fail hearing screening who receive diagnostic evaluation by 3 months of age increased from 54% in 2004 to 60% in 2005 and to 76% in 2006.
- The average age of identification of infants with hearing loss decreased from 4 months of age in 2003, to 3.5 months of age in 2004, to 2.5 months of age in 2005. Statistics for 2006 haven't been determined yet due to many of the babies still receiving follow up care.

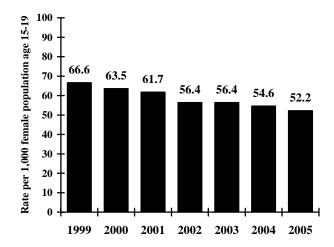
- The percent of Michigan births that receive newborn hearing screening will increase.
- The percent of babies who fail hearing screening who receive diagnostic evaluation by 3-months of age will increase.
- The average age of identification of infants with hearing loss will decrease.

Appropriations # - 14281/12273
Family Planning Local Agreements
Family Planning (Implementation of 1993 PA 133)

FY 06 Funds Appropriated \$658,100

FY 07 Funds Appropriated \$634,600 \$23,500

Estimated Teen Pregnancy Rates (Age 15-19) Michigan Residents, 1999-2005



Source: MDCH, Vital Records and Health Statistics, 1/05

Project Name: Family Planning, Family Planning (Implementation of 1993 PA 133)

Target Population: Females and males desiring to exercise personal choice in determining the number and spacing of their children.

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children.

Project Accomplishments for FY 2006:

- Served 178,767 females and males at risk for unintended pregnancy.
- Served 53,027 female at-risk teens.
- Screened 74,769 female teens and women for cervical cancer (Pap smears).

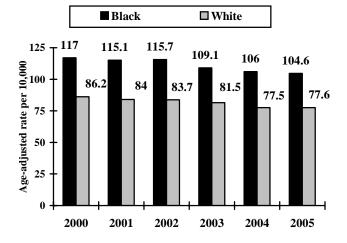
- To serve at least 170,000 female and male clients with at least 63 percent of clients living at or below 100 percent of the federal poverty level.
- To serve at least 53,027 female teens at-risk for unintended pregnancy.
- To follow-up with 100 percent of females with an abnormal cervical cancer screening (Pap Smears).

Appropriations # - 11268 Minority Health Grants and Contracts

FY 06 Funds Appropriated \$900,000

FY 07 Funds Appropriated \$900,000

Age-Adjusted Death Rates by Race Black vs. White 2000-2005



Source: MDCH, Vital Records

Project Name: Health Disparities Reduction Program (HDRP)

Target Population: African Americans, Latino/Hispanics, Native Americans, Asian Americans, and Arab Americans/Chaldeans

Project Description: The goal is to reduce health disparities by supporting a portfolio of social/behavioral interventions that will have the greatest impact among racial and ethnic minorities. This is accomplished by funding programs, through a multi-year competitive grant process, that target populations at the greatest relative risk in terms of behavior and geographic location. Program goals for all disparate populations include: 1) Promoting the provision of quality primary and secondary prevention services; 2) Promoting broader access to timely and culturally appropriate services; 3) Developing broader community-based decision capacities; 4) Continuously attempting to link people to existing services; 5) Promoting more comprehensive and inclusive departmental program planning initiatives.

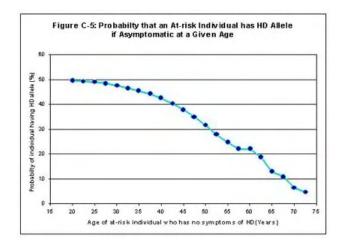
Project Accomplishments for FY 2006:

- Adult Well Being Program experienced an 85% increase in health seeking behaviors.
- St. Joseph Mercy Hospital's Comprehensive Asthma Program demonstrated a 35% increase in self-management behavior.
- St. John Community STEP on Diabetes Program reported 29 screenings, with 776 African Americans screened.
- Successful institutionalizing of Infant Safe Sleep Model at Henry Ford Hospital.
- Lunch & Learn Sessions to provide information on Public Health and other medical models. Sessions were well attended and participant feedback was very positive.
- Held MSU Student Shadowing Day to introduce minority students to careers in the public health profession.
- Outcome objectives were met for 11 other funded programs, including a variety of initiatives.

- Support Public Health initiatives with proven effectiveness and provide technical assistance to communities implanting such initiates.
- Leverage resources to initiate new programs such as
 - Providing dental sealants for minority children in collaboration with the Bureau of Family and Maternal Health;
 - Providing breast and cervical cancer screening among minority women;
 - Collaborating with community partners to support Metabolic Syndrome Initiatives.

Appropriations # 11380 Huntington's Disease

FY 07 Funds Appropriated \$50,000



Source: Genetic Testing - The science and practice of genetic testing for Huntington's disease

http://www.stanford.edu/group/hopes/diagnsis/gentest/s12.html

Project Name: Huntington's Disease

Target Population: Individuals with Huntington's disease (HD), their families, caregivers, and Health providers. Access to individual information and support is particularly important for HD families since both stigma and lack of awareness impede individuals and families from obtaining diagnosis, treatment, and family caregiver assistance.

Project Description: Huntington's disease is a rare genetic disorder caused by degeneration of brain cells in certain areas of the brain. An estimated 1000 persons in Michigan have HD. In Michigan, the Huntington's Disease Society of America-Michigan Chapter (HDSA-M) is uniquely capable of providing services needed by HD families in the state. HDSA-M maintains a database of community resources and provides individual, telephone and email support to families. The HDSA-M maintains a toll-free helpline for families and professionals. It sponsors support groups in areas where HD is prevalent and provides educational presentations to families.

- Maintain database of community resources in Michigan.
- Provide HD information and referral for 1000 individual contacts.
- Sponsor 14 support groups.
- Provide 60 educational presentations.
- 80% of those who receive a referral will report that the assistance was good, very good, or excellent.
- 80% of caregivers who complete an educational program evaluation will say their effectiveness as a caregiver increased.
- 80% of caregivers who complete a support group evaluation will report their ability to provide effective care increased.

Appropriations # - 16778/16758 Immunization Program Management & Field Support

FY 06 Funds Appropriated \$2,086,800

FY 07 Funds Appropriated \$ 2,090,400

MCIR Historical Perspective of Registered Users and Shots Recorded 1997-2006

| Year | Register Users | Doses Entered |
|------|----------------|----------------------|
| 1997 | 137 | None |
| 1998 | 1,327 | 6.5 million |
| 1999 | 2,007 | 5.5 million |
| 2000 | 2,333 | 4.4 million |
| 2001 | 2,815 | 8.3 million |
| 2002 | 3,493 | 5.5 million |
| 2003 | 4,242 | 4.8 million |
| 2004 | 7,459 | 2.6 million |
| 2005 | 19,759 | 2.7 million |
| 2006 | 23,000 | 5.3 million |

Source: Immunization Section Program, MDCH.

Project Name: Immunization: Michigan Care Improvement Registry and Administration

Target Population: All residents

Project Description: Michigan Care Improvement Registry (MCIR) is a regionally based, statewide childhood immunization registry that contains over 53 million shot records of 4.1 million individuals under the age of 20 years. The department is currently working through subcontracts with six MCIR regions to enroll and support every immunization provider in the state. Currently, there are 2,565 immunization providers and 3,500 healthcare organizations enrolled in MCIR, 4,594 schools and 3,790 childcare programs. Over 9,000 users login to the system daily. Users can access a child's immunization record to determine if they need additional vaccines. The MCIR will generate recall letters to notify responsible parties whose children have missed shots and encourage them to visit their immunization provider to get the needed vaccines.

Project Accomplishments for FY 2006:

- 2,327 provider offices submitted over 5.3 million shot records to MCIR in 2006.
- Integrated the school and childcare immunization reporting into MCIR; over 95% of the schools utilized MCIR for their November 1, 2006 report.
- Targeted MCIR effort to recruit and train all immunization providers (200 more provider offices) in SE Michigan enabled immunization rates for 94,000 children (19-36 months) to increase by 9%.
- The Public Health Informatics Institute sponsored 45 public health professionals representing 16 state health depts. to visit MI, showcasing MCIR's desire to integrate MCIR w/ other child health data sets.
- The Governor signed legislation which allows MCIR to become a life-span registry and integrate with other child health data sets such as Lead Screening, Newborn Screening & Hearing

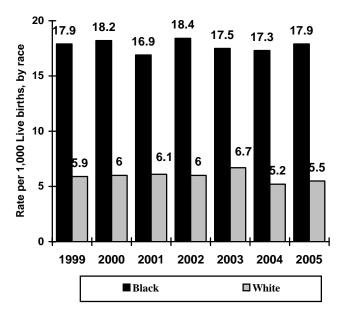
- Add required fields to MCIR to prepare for pandemic flu outbreak data collection.
- Add a high-risk flag to MCIR to indicate the need for influenza vaccine for children with asthma and other special health risk factors; this will allow providers to generate reminder letter for high-risks.
- Continue to develop HL7 capabilities for seamless integration with electronic medical records systems for data collection and immunization assessment purposes.
- Enhancements to the vaccine accountability inventory functionality within the MCIR to better track and account for vaccine being administered and inventoried around the state.
- Incorporate and integrate the Sickle Cell Case Information System and Sickle Cell Trait Information Registry with the MCIR

Appropriations # -14259 Special Projects

FY 06 Funds Appropriated \$900,000

FY 07 Funds Appropriated \$1,100,000

Infant Mortality Rate, by race Michigan 1999-2005



Source: Vital Records & Health Data Development Section, MDCH

Project Name: Infant Mortality

Target Population: Counties in Michigan with the largest disparity in black vs. white infant mortality.

Project Description: To reduce racial disparity in infant mortality across Michigan. Funds are contracted with local health departments to initiate projects to meet specific needs identified by focus groups, community needs assessment and evidence-based programs. Local communities are expected to engage key stakeholders in a collaborative effort to address the problem. In addition, funds will provide state level support.

Project Accomplishments for FY 2006:

- Engaged key community representatives, including churches, health insurance plans, hospitals and parents in ongoing local efforts to reduce infant mortality.
- Identified and linked high-risk pregnant women and mothers with young children to relevant systems of care and services.
- Local communities held focus groups that yielded information regarding cultural and systems barriers to healthy birth outcomes.
- Provided Safe Sleep and breastfeeding education to parents, local hospitals, community organizations, and childcare providers.

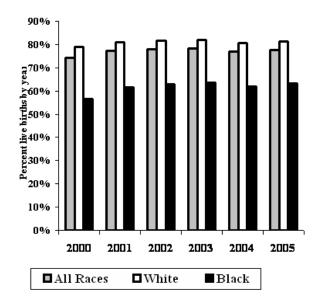
- Improve the health of women prior to and between subsequent pregnancies.
- Reduce pre-term births and low birth weight infants.
- Reduce unplanned pregnancies, increase planned pregnancies and inter-pregnancy intervals.
- Coordinate and ensure continuity of care among local systems that support women, infants and families, including WIC, Maternal Infant Health Program, family planning, etc.

Appropriations # - 14262 Local Maternal/Child Health Services

FY 06 Funds Appropriated \$246,100

FY 07 Funds Appropriated \$246,100

Percent of Live Births with Adequate Level of Prenatal Care, by Race, Michigan 2000-2005



Note: The Kessner Index is a classification of prenatal care based on the month of pregnancy in which prenatal care began, the number of prenatal visits and the length of pregnancy (i.e. for shorter pregnancies, fewer prenatal visits constitute adequate care.)

Source: MDCH Division of Vital Records and Health Statistics

Project Name: Local Maternal/Child Health (MCH) Services

Target Population: Prenatal women, mothers, infants, children and adolescents of any income group with a special focus on those who are low income.

Project Description: The project provides support for local communities to address MCH issues in their community that will impact the health status of this target population. There are 18 national and 9 state performance measures/objectives, of which one or more can be addressed, or with justification, a community specific objective for the target population can be selected. The indicators include an array of maternal/child health issue areas such as immunization, lead screening, infant mortality, newborn hearing screening, children's health insurance cover, etc.

Project Accomplishments FY 2006:

- The following, reported in 2006, are examples of accomplishments by three of 45 agencies that receive funds to address locally identified health needs of women and children in their jurisdiction:
 - <u>Wayne County Department of Public Health</u>: 242 families were provided Child Health Services and 295 clients were provided with Maternal Infant Health Program Services.
 - <u>District Health Dept. #10</u>: 462 families were served by the Healthy Futures Program and at least 80% of young children (19-35 months old) were fully immunized.
 - <u>Kent County Health Department</u>: 5,700 Maternal Infant Health Program Services were provided.

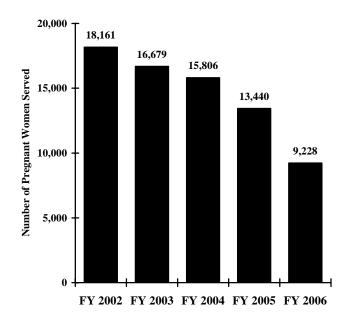
- The more frequently chosen areas to use the funds for are advocacy and outreach services that address the needs of children with special healthcare needs, prenatal care outreach and enrollment, family planning, Maternal Support Services and Infant Support Services. Following are examples of goals set by 3 of the 45 agencies receiving allocations to address the local community's needs & objectives:
 - <u>St. Clair County Health Department</u>: Over 570 clients will be provided Children's Special Health Care Services. Another 1200 adolescents will receive assessment, mental health and primary care services at their Teen Health Center.
 - <u>Calhoun County Department of Public Health</u>: 120 families will receive assessment and referral; through Children's Special Health Care Services, 95% of children will have complete immunizations records school entrants by district; and 100% of infant deaths from 2006 will be reviewed by the FIMR Case Review Team.
 - <u>District Health Department #2</u>: Target is to reach 300 families through the Maternal Infant Health Program (MIHP) in an effort to address prenatal and perinatal issues, screening for maternal depression, preventing preterm and/or low birth weight infants, and access to family planning services.

Appropriations # - 33500 Local MCH Services

FY 06 Funds Appropriated \$1,575,500

FY 07 Funds Appropriated \$1.575,500

Number of Pregnant Women Served, FY 2002 - FY 2006



Source: MOMS Oracle Database

Note: Total funding for MOMS has been reduced which explains the reduction in the number of pregnant women served.

Project Name: Maternal Outpatient & Medical Services (MOMS)

Target Population: Women who are pregnant or were recently pregnant (within two calendar months following the month the pregnancy ended), who apply for medical coverage for their pregnancy at a Local Health Department (LHD), Federally Qualified Health Center (FQHC), or Department of Human Services (DHS) office. Customers must also meet one, or more, of the following criteria; Women with income at, or below, 185% of the Federal Poverty Level who are applying for Medicaid, Women who are covered by the Medical Emergency Services (ESO) program.

Project Description: Provided medical coverage for approximately 9,228 pregnant women during FY 2006. The program allows women to seek early prenatal care while awaiting eligibility determinations for Medicaid. Services covered include, prenatal and pregnancy-related care, pharmaceuticals and prescription vitamins, laboratory services, radiology and ultrasound, maternal support services, childbirth education, outpatient hospital care, and labor and delivery services including all professional and inpatient hospital services. Funding sources utilized for the MOMS program are SCHIP, Healthy Michigan Funds and general funds.

Project Accomplishments for FY 2006:

- Provided access to early prenatal care for women applying for Medicaid.
- Assisted in reducing infant mortality and incidents of pre-term labor.
- Assisted in reducing admissions into neonatal intensive care.
- Assisted in increasing infant birth weights.
- Provided information for LHD, FQHC and DHS.

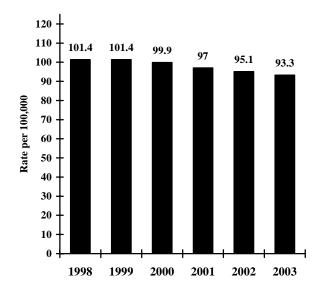
- Provide access to early prenatal care for women applying for Medicaid.
- Assist in reducing infant mortality and incidents of pre-term labor.
- Assist in reducing admissions into neonatal intensive care.
- Assist in increasing infant birth weights.
- Provide information and schedule annual MOMS meetings for LHD, FQHC and DHS.

Appropriations # - 11380 Chronic Disease Prevention

FY 06 Funds Appropriated \$200,000

FY 07 Funds Appropriated \$200,000

Michigan Age-Adjusted Hip Fracture* Rate, 1998-2003



Source: Michigan Inpatient Data base, DVRHS, MDCH.

* Cases were Michigan residents, discharged from a hospital (MI, IN, OH, WI) in 1998, 1999, 2000, 2001, 2002, and 2003 with a principal diagnosis of hip fracture (ICD-9-CM 820.0-820.9). In-hospital deaths were included. Age-adjusted annual rates were calculated using the U.S. 2000 Standard population.

Project Name: Osteoporosis

Target Population: All residents of Michigan. The project initiatives target women, senior citizens, children and adolescents, and health care providers.

Project Description: The primary objectives are prevention, detection, and treatment of osteoporosis and osteopenia to reduce both the prevalence of osteoporosis and the number of osteoporosis-related fractures. Projects include public and professional education, community-based screening and counseling, dissemination and support for voluntary quality assurance standards for health professionals, and program evaluation. The Osteoporosis Project is administered through the Michigan Public Health Institute, which in turn subcontracts with community and statewide partnership agencies.

Project Accomplishments for FY 2006:

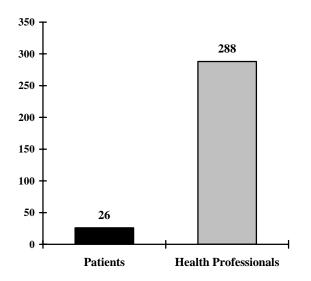
- <u>Community education</u>: 93 educators throughout Michigan were trained to conduct the Better Bones, Brighter Futures community education programs; 925 people participated in community education programs.
- <u>Community risk assessment and bone mineral density screenings</u>: 610 adults assessed to be at risk for osteoporosis received counseling and bone mineral density screening tests.
- The Michigan Coalition for Bone Health (MCBH): expanded its membership by 30% and 65 people attended the annual conference in April. The MCBH initiated projects based on strategic plan vision.
- <u>The Michigan Consortium for Osteoporosis</u>: The consortium educated over 110 participants at the 7th Annual Symposium held for members & other health care providers.

- Conduct community education programs to reach targeted populations; evoke healthy behavior changes in 50% of participants.
- Provide community risk assessment, counseling, and bone mineral density screenings for 100 adults who are from underserved or at-risk populations.
- Expand the membership of the Michigan Coalition for Bone Health by 20% and initiate implementation of two projects to address the 2005-2010 strategic plan vision priorities.
- Facilitate and support the work of the Michigan Consortium for Osteoporosis to educate health care providers and improve voluntary quality assurance standards to ensure that a minimum of 100 bone densitometer operators have agreed to comply with quality assurance standards.
- Conduct the Behavioral Risk Factor Survey-Osteoporosis Module. Data will be used to guide project priorities.

Appropriations # - 11387 Michigan Parkinson's Foundation

FY 07 Funds Appropriated \$50,000

Number of Clients and Health Professionals Served Through the Multidisciplinary Clinic, FY 2005



Source: Agency Quarterly and Annual Report

Project Name: Parkinson's Disease

Target Population: Individuals with Parkinson's disease, their families, caregivers; and health providers.

Project Description: The Michigan Parkinson's Initiative focuses on increasing access to specialized health care to ensure accurate diagnosis and optimal treatment, increasing awareness about Parkinson's Disease, and providing education about care and treatment. Multidisciplinary, "second opinion" clinics staffed by movement disorder specialists evaluate patients who live in areas of the state that lack these specialized services. Education provided to patients and families during the clinic visit and educational forums for health care professionals and consumers increase knowledge about Parkinson's Disease and its treatment.

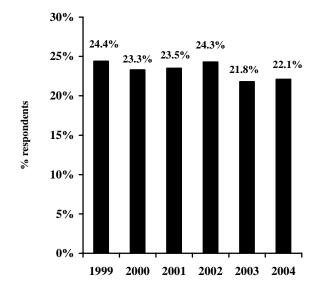
- Regional one-day multidisciplinary clinics: Conduct 2 multidisciplinary second-opinion clinics in targeted areas of the state with patients receiving multidisciplinary assessments, education and recommendations.
- **Community and medical education programs**: Conduct two educational programs for health care professionals and consumers. Programs will have interactive video conferencing and the video will be distributed.
- **Educational Programs :** Provide two educational programs, eexpecting to reach 30 health professionals.
- **Media Campaign:** Develop and pilot a media campaign to increase public awareness of Parkinson's Disease and topics related to early detection, diagnosis and appropriate referrals.

Appropriations # - 11369 Physical Fitness, Nutrition, and Health

FY 06 Funds Appropriated \$700,000

FY 07 Funds Appropriated \$700,000

No Leisure-Time Activity*, Michigan Residents 1999-2004



^{*} Proportion respondents who reported they did not participate in any physical activities, recreation, or exercise in their leisure time within the past month. Source: Michigan BRFS, 1999-2004, MDCH

Project Name: Physical Fitness/Governor's Fitness Council

Target Population: Michigan children and adults

Project Description: The purpose of the project is to promote physical education and physical activity events in Michigan.

Project Accomplishments for FY 2006:

- Coordinated the National Walk to School Day to increase awareness of the importance of regular physical activity through walking and biking to school. Over 200 schools participated.
- Continued to work on the Exemplary Physical Education Curriculum (EPEC), a physical education curriculum to teach children lifelong skills. Completed revised formatting for K-5 objectives and provided training for 20 teachers, potentially impacting 10,000 students.
- The EPEC is designed to teach children the skills needed to be physically active for a lifetime. Two K-5 objectives were revised and three Lifetime Activity modules were developed Resistance Training, Basketball and Tennis.
- Worked with the Governor's Office to co-organize the Labor Day Bridge Run in conjunction with the Labor Day Bridge Walk. Local communities were encouraged to host a five-mile "virtual bridge walk" on Labor Day with 16 communities participating.

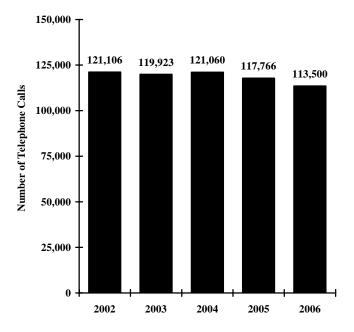
- Complete computer-based version of the 6-12 Personal Conditioning Training and train 50 teachers, potentially impacting 12,000 students.
- Finalize two EPEC Lifetime Activity Modules (Basketball and Tennis) and provide training to 50 teachers, potentially impacting 12,000 students.
- Market Walk to School Day event to Michigan schools and register 270 schools. Expand Safe Routes to School program by training 20 elementary schools.
- Organize Labor Day Mackinaw Bridge Run attracting 300 participants.
- Market Virtual Labor Day Bridge walks to local communities with 30 communities participating.

Appropriations # - 33860 Special Adjustor Payments Special DSH Payments

FY 06 Funds Appropriated \$300,000

FY 07 Funds Appropriated \$300,000

Number of Telephone Triages from Public, 2002-2006



Source: Division of Environmental and Occupational Health, MDCH.

Project Name: Poison Control

Target Population: All Michigan residents.

Project Description: The Michigan Poison Control System consists of two regional certified poison centers: Children's Hospital of Michigan Regional Poison Control (CHM) in Detroit, and the Regional Poison Control Center in Grand Rapids. The centers provide 24 hour/day, 365 days/year, toll-free telephone access for poison triage and first aid advice. The Poison Control program utilizes a comprehensive approach to preventing poison exposure through education of the public and to minimize severity of injury by education of healthcare professionals in the latest treatment for poisoning.

Project Accomplishments for FY 2006:

- Telephone triage from the public (information and advice) This is provided 24 hours, 365 days per year. Over 113,500 calls received that involved over 82,800 human exposures.
- Total number of successful outcomes (i.e., avoided emergency department visits) 64,351/82,832 human exposures = 77.7% avoided emergency department.
- Consultative service to healthcare providers.
- Provided consultations by medical toxicologists.
- Provided public education through health fairs, community presentations, publications and other venues.
- Provided daily data to MDCH for purpose of syndromic surveillance. This involves the continuous auto
 uploading of data, occupational pesticide poisonings, and environmental pesticide reporting. Specialized
 reports were set up to assist MDCH in responding to the national e. coli (spinach) and botulism (carrot
 juice) events.

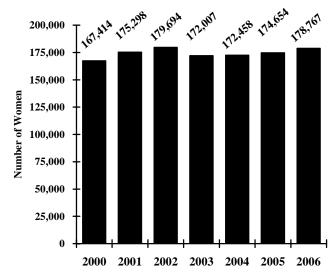
- Continue telephone triage from the public.
- Continue consultative services to healthcare providers.
- Continue public education at health fairs, community presentations, publications, and other venues.
- Continue to provide consultation by medical toxicologists.
- Continue to provide MDCH poison control data for the purpose of syndromic surveillance.
- Provide specialized reporting in response to emergent events/outbreaks, including continuation of waterproofing agent surveillance activities.

Appropriations # - 14251 Pregnancy Prevention Program

FY 06 Funds Appropriated \$5,033,300

FY 07 Funds Appropriated \$5.033,300

Number of Women Receiving Pregnancy Prevention Services, 2000 - 2006



Source: Family Planning Annual Report, Women's and Reproductive Health Unit, MDCH.

Project Name: Pregnancy Prevention

Target Population: Females and males at risk for unintended pregnancy for family planning services, and for the Michigan Abstinence Program (MAP): Adolescents (9-17 years old and up to 21 years of age for special education populations) and their parents/families and for the Pregnancy Risk Assessment Monitoring System (PRAMS) for randomly selected women to receive the survey.

Project Description: The Family Planning program provides low-cost, high quality contraceptive services and supplies. The mission of the program is to provide individuals the information and means to exercise personal control in determining the number and spacing of their children. The Michigan Abstinence Program (MAP) promotes abstinence from sexual activity and related risk behavior; which includes providing parent education and community awareness.

Project Accomplishments for FY 2006:

- Served 178,767 female teens and women under 250% of poverty (unduplicated count).
- Served 53,027 female at-risk teens.
- Screened female teens and women for sexually transmitted infections (including HIV).
- Screened female teens and women for cervical cancer (Pap smears).
- The Michigan Abstinence Program provided abstinence education to Michigan residents: youth, parents, adults, and caregivers.
- 12,756 youth aged 9-17 participated in abstinence education with 14 or more hours of educational contact.

Project Goals FY2007:

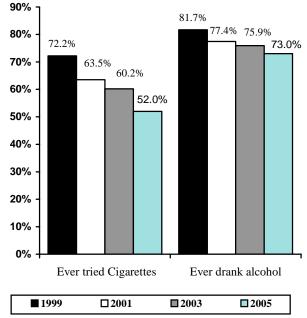
- To serve at least 170,000 people with 63% of clients living at or below 100% poverty level.
- To serve at least 53,027 female teens at-risk for unintended pregnancy.
- To increase the number of Michigan youth choosing to remain abstinent from sexual activity and other risky behaviors.
- To increase the number of parents/adults/caregivers communicating effectively with youth regarding the benefits of abstinence from sex and other related risky behaviors.
- To increase the number of communities providing social environments that support sex-free and drugfree lives for youth.
- To continue PRAMS surveys and generate at least 4 quarterly reports and 1 annual on maternal and family planning data indicators using PRAMS data.

Appropriations # - 14270 School Health and Education Programs

FY 06 Funds Appropriated \$500,000

FY 07 Funds Appropriated \$500,000

Michigan Youth Behavioral Survey Results by Percentage of MI High School Students, 1999, 2001, 2003 and 2005



Source: Michigan Youth Risk Behavior Survey, 2005 Report

Project Name: School Health Education / Michigan Model for Health

Target Population: School-aged children throughout Michigan and their families

Project Description: The Michigan Model provides comprehensive school health education for Michigan's school-aged children and their families. School Health Coordinators at 25 regional sites across the state provide health-related professional development, resources and ongoing support/technical assistance for public, charter and nonpublic schools in kindergarten through 12th grade. The Michigan Model for Comprehensive School Health Education curriculum is supported and updated through a statewide collaboration providing a research-based approach to health education. The Michigan Model is the primary health education curriculum used in kindergarten through high school.

Project Accomplishments for FY 2006:

- Released revised/updated 4th and 5th grade curriculum and conducted Training of Trainers for School Health Coordinators in September 2006.
- Continued multi-year rigorous, randomized control evaluation study on the curriculum.
- Began content expert review of revised/updated 2nd and 3rd grade curriculum.
- Ongoing revision of kindergarten, 1st grade and 6th grade curriculum.
- Revised and updated both middle and high school nutrition modules to incorporate new federal dietary and physical activity guidelines. Training of Trainers conducted in September 2006.

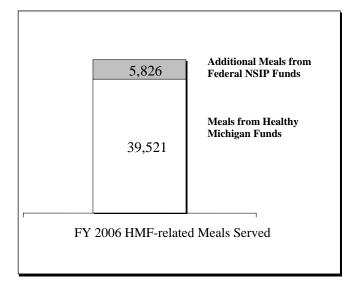
- Release revised/updated middle and high school nutrition modules.
- Release high school HIV, STI and pregnancy prevention module and conduct Training of Trainers in February 2007.
- Release 2nd and 3rd grade curriculum and provide Training of Trainers in September 2007.
- Conduct content expert review and finalize revision and updating of kindergarten and 1st grade.
- Continue multi-year rigorous evaluation with training, implementation and data collection at the 4th grade level.

Appropriations # - 46512 Senior Nutrition Services

FY 06 Funds Appropriated \$167,000

FY 07 Funds Appropriated \$167,000

Total FY 2006 HMF-related Meals Served: 45,347



Project Name: Senior Nutrition Services

Target Population: Homebound senior citizens age 60 and over.

Project Description: Home-delivered meals are served to those age 60 or older that are homebound and have no other means of meal preparation. Meals served must meet established nutritional requirements, such as 1/3 of the recommended dietary allowance (RDA), and be low in sugar, fat and sodium. Meals are to be made available at least 5 days per week. The Healthy Michigan funding enables the provision of meals on weekends and holidays, and support special diet meals as appropriate.

Project Accomplishments for FY 2006:

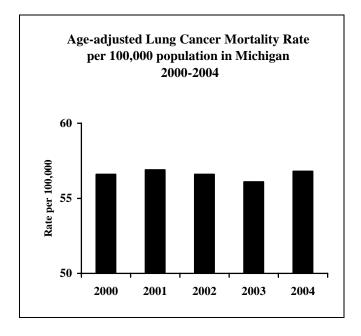
- The program provided 8.124 million meals to 52,805 homebound seniors. The HMF portion equaled 39,521 meals.
- Total funding used for support of the home delivered meals program was \$34,331,884. Federal funds comprised 39.4% of the funding, with the state and local levels contributing 30.8% and 29.9.3% respectively.
- Program participants contributed an average of \$.73 per meal in donations, which generated an additional \$5,966,648 in funding. These additional funds are included as part of the local percentage and used to expand the number of meals available.
- The additional 39,520 meals supported by the HMF increased the total number of meals eligible for federal NSIP reimbursement and generated an additional \$24,617 to support program activities.
- 81,063 meals were provided to 390 care recipients on behalf of their caregivers through the National Caregiver Support Program.

- Customer satisfaction survey to be completed during 2007.
- Additional nutrition education for clients and caregivers.
- In-service programs for HDM delivery persons to help them be effective "gatekeepers" for the seniors they serve.

Appropriations # - 11360 Smoking Prevention

FY 06 Funds Appropriated \$2,719,500

FY 07 Funds Appropriated \$2.738,500



Source: MDCH, Age-adjusted rates are computed by the direct method, using as the standard population the age distribution of the total population of the United States for the year 2000

Project Name: Smoking Prevention Program

Target Population: Michigan residents (Youth, adults, seniors, Communities of Color)

Project Description: 1) Prevent youth from initiating tobacco use, educate the public on the dangers of secondhand smoke, promote smoke-free environments, and increase the awareness about the impact of tobacco on minority populations. 2) Encourage and assist tobacco users in quitting.

Project Accomplishments for FY 06:

- The City of Grand Rapids and Midland, Saginaw, Alger, Schoolcraft, and Mackinac counties passed smoke-free worksite regulations. Effect of smoke-free worksites regulations/ordinances in 3 cities and 15 counties is to protect over 38.7% percent of MI workers from toxic effects of exposure to secondhand smoke.
- Over 90 percent of Michigan public four-year universities and over 50 percent of private four-year colleges and universities have implemented smoke-free residence hall policies.
- Eleven additional MI public and private schools have implemented 24-hour/7-days-a-week tobacco-free school policies, protecting students from toxic effects of exposure to secondhand smoke.
- The smoke-free apartments initiative is ongoing in 24 counties and:1) identified over 250 smoke-free apartment buildings, 2) assisted in gaining the adoption of the first smoke-free building policy by a local housing commission in Cadillac, 3) assisted many private landlords in adopting smoke-free policies to protect resident families from the hazards of secondhand smoke in their homes. These new policies affect over 6,584 untis.

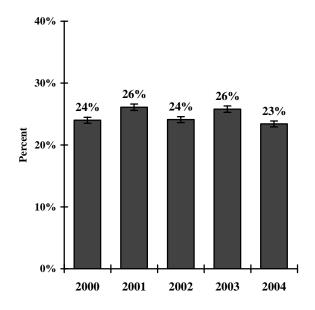
- Support passage of smoke-free worksites regulations in at least 17 counties & 4 cities to protect residents from hazards of secondhand smoke, increase cessation rates, & reduce social acceptance.
- Increase to 80% Michigan public and private schools that implement 24/7 tobacco-free policies, to protect students from exposure to secondhand smoke and reduce social acceptability of tobacco use.
- Decrease smoking rates among youth through collaboration with youth organizations and worksites.
- For evaluation purposes, collect tobacco-related baseline data on Michigan's five major ethnic populations and other population groups disproportionately affected by the burden of tobacco.
- Improve health professionals' understanding and involvement in supporting patients wanting to quit.
- Increase the number of cost-sharing agreements among Medicaid Health Care Plans to support use of the Michigan Quitline, to help reduce the 44% smoking rate among the Medicaid population.
- Increase the number of municipalities that have developed and implemented smoke-free policies for HUD Housing Developments, in order to create smoke-free environments, encourage quit attempts, and reduce social acceptability of tobacco.

Appropriations # - 11360 Smoking Cessation Quit Kit Nicotine Replacement Therapy Program

FY 06 Funds Appropriated \$900,000

FY 07 Funds Appropriated \$900,000

Smoking Prevalence in Adults, 2000-2004



Source: Data for Adult (18 years and Older) Smoking Prevalence is taken from the BRFS, MDCH.

Project Name: Smoking Cessation Quit Kit - Nicotine Replacement Therapy Program (NRT)

Target Population: Uninsured Michigan smokers

Project Description: The nicotine replacement therapy program (NRT)--a program to provide a supply of nicotine patches or gum--was mandated by the legislature in June 2004. Distributing NRT through the quit line allows the Department to: 1) screen callers for medical conditions that might contraindicate the use of NRT; 2) instruct callers in the proper use of NRT to avoid an under- or overdosing situation; and, 3) screen callers to ensure medication is not distributed to minors without parental permission and medical supervision. NRT is distributed to the uninsured as they are the most at risk, least likely to be able to afford medication, and are statistically far more likely to be smokers. HMF money was awarded to the vendor distributing NRT under this program by competitive request for proposals.

Project Accomplishments for FY 2006:

- The Michigan Cessation Quitline coaches have responded to 11,852 calls from smokers requesting information and/or support to quit tobacco use.
- Michigan Quitline coaches have achieved a 26% quit rate after 6 months with use of NRT. This compares favorably to a national average 6 month quit rate (with or without NRT) of 24%.
- More than 3,899 uninsured people have received NRT through the Quitline. The uninsured represent over 80% of those using the Quitline to support their success in quitting.
- The Health Promotion Clearinghouse responded to over 10,500 calls for information and/or support to quit smoking, and distributed over 119,000 quit kits.

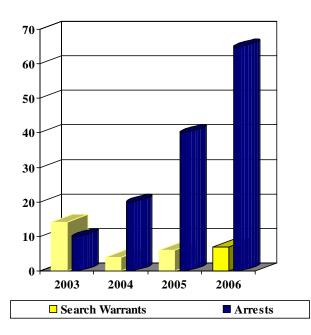
- Increase the number of pregnant Medicaid smokers who are advised and assisted to successfully quit tobacco use.
- Expand the capacity of the Quitline to provide proactive counseling to Michigan callers, including providing NRT for uninsured participants.

Appropriations # - 11390 Tobacco Tax Collection & Enforcement

FY 06 Funds Appropriated \$610,000

FY 07 Funds Appropriated \$610,000

Michigan Tobacco Smugglers Arrests by Year



Source: Tobacco Tax Collection and Enforcement Report, State Of Michigan

Healthy Michigan Fund – FY 2006 Report

Project Name: Tobacco Tax Collection and Enforcement

Target Population: Individuals and retailers who purchase/sell tobacco products illegally

Project Description: To protect the State of Michigan, its economy and its welfare, through the prevention and suppression of organized smuggling of untaxed tobacco products in the state and through enforcement of the tobacco tax act, and other laws pertaining to combating criminal activity.

Project Accomplishments for FY 2006:

- Increased arrests of tobacco smugglers in the State of Michigan from the previous year.
- Increased seizure amounts from the previous years.
- Law enforcement agency leader in the State Of Michigan in combating illegal smuggling.
- Increased amount of regulatory inspections and complaints taken in the state.
- Continued to identify new and current trends in smuggling:
 - Counterfeit stamps affixed to pack of cigarettes.
 - Large seizures of illegally smuggled molasses tobacco coming into the state.
 - The use of scotch tape to partially remove legitimate stamp onto out of state packs of cigarettes.
- Worked closely with Department of Treasury on identifying individuals liable for assessments.
- Continued to investigate smuggling across the state.
- Continued with partnership of federal agencies in combating internet purchases.
- Assisted Dept. of Treasury in identifying individuals liable for assessments of \$1,122,240.
- Assisted federal, state, and local law enforcement agencies on complaints related to tobacco smuggling and theft of cigarettes.
- Implemented and facilitated training programs across the state with regards to tobacco tax enforcement and tobacco smuggling.

- Continue to develop partnerships with government entities in combating all types of smuggling.
- Continue to work aggressively in identifying smugglers of tobacco.
- Maintain or increase higher number in arrests of tobacco smugglers.
- Maintain or increase seizures of illegal contraband tobacco.
- Continue to facilitate training programs to law enforcement on identifying tobacco smuggling.
- Continue to show a strong presence in regulating the industry through retail inspections.
- Continue to be the primary resource and enforcement team for tobacco smuggling in the State of Michigan.

Appropriations # - 12271 Local Health Services

FY 06 Funds Appropriated \$220,000

FY 07 Funds Appropriated \$220,000

Accreditation Program Goals

- 1. Assist in continuously improving the quality of local public health departments.
- 2. Establish a uniform set of standards that define public health and service as fair measurement.
- 3. Ensure local level capacity to address core functions of public health.
- 4. Provide a mechanism for accountability to demonstrate effective use of financial resources.

Project Name: Training and Evaluation--LPHO

Target Population: 45 Local Public Health Departments serving 83 Michigan Counties.

Project Description: The mission of the Michigan Local Public Health Accreditation Program is to assure and enhance the quality of local public health in Michigan by identifying and promoting the implementation of public health standards for local public health departments; it evaluates and accredits local health departments on their ability to meet these standards. The program is a collaborative effort between Michigan's forty-five local health departments (LHDs), the Michigan Departments of Community Health (MDCH), Agriculture (MDA), and Environmental Quality (MDEQ), and the Michigan Public Health Institute (MPHI). Program funding is contracted to MPHI to coordinate and administer this program.

Project Accomplishments for FY 2006:

- Completed thirteen on-site evaluations of local health departments to assure local level capacity to provide services and ensure minimum program standards are met.
- Initiated quarterly Accreditation Coordinators conference calls to increase and improve communication between state agency programs and LHD's.
- Received an average of nine review evaluation forms from LHD for each of the thirteen programs within accreditation.
- Collaborated with Michigan's Public Health Institute (MPHI) to submit and receive a two year grant award through the Robert Wood Johnson Foundation.
- Created an on-line accreditation reporting module for reviewers and LHDs to report on findings and access reports.

- Complete twenty-one on-site evaluations of LHDs to assure capacity to provide services and ensure minimum program requirements are met.
- Expand current quality assurance function to assess LHDs ability to meet MPR and indicators.
- Assess area's needing improvement within the new Section L Powers and Duties of Local Health
 Departments and make modifications to Minimum Program Requirements (MPR) and indicators, as
 needed.
- Enhance and update accreditation-related training for state agency reviewers and local public health department employees.